

# Survey of Practices in Health Promotion and Education Supervision of Theses and Dissertations

*Judy Murnan, Randall Cottrell, and Liliana Rojas-Guyler*

## Abstract

There have been no published studies documenting current practices regarding graduate student research supervision by faculty in health education programs. Documenting current standards for such supervision may help programs gauge their practices against a national sample. This study assessed practices utilized by U.S. universities and colleges for faculty to supervise theses and dissertations in health education programs. Requirements of committee composition, graduate faculty status, faculty rank, years of service, and publication record were assessed. Funding, publication expectations, and training of faculty were also examined. Surveys (n=137) were sent to department heads, directors or program coordinators of graduate programs (62.7% response rate). The majority of institutions required faculty to earn graduate faculty status before they could chair a thesis (80.3%) or a dissertation (82.4%). Fifteen percent required faculty training before chairing a thesis and 25.9% required training before chairing a dissertation. The majority (92.4%) reported no maximum number of committees on which a faculty member could serve. One-third of respondents were either very dissatisfied or dissatisfied with current guidelines for supervision, while 17.3% were somewhat satisfied or partially satisfied. A need exists for health education programs to more systematically prepare junior level faculty to guide thesis and dissertation work.

## Background

Quality graduate student research is facilitated with the assistance of a prolific and attentive advisor. The dissertation advisor plays a critical role in the dissertation process (Council of Graduate Schools, 1991). Likewise, the advisor of a masters thesis plays a similarly important role. The responsibilities

of faculty who advise graduate student research have been extensively delineated in the literature (Aspland, Edwards, O'Leary, & Ryan, 1999; Crosta & Packman, 2005; Spillett & Moisiewicz, 2004). One responsibility of graduate student research advisors is to create learning environments that both support and challenge students to learn (Daloz, 1999). The graduate student/mentor relationship is reciprocal. While graduate students benefit from the mentoring relationship by developing research skills, mentors benefit from the personal satisfaction they receive and the potential for joint research and career enhancement (Busch, 1985; Green & Bauer, 1995; Luna & Cullen, 1998).

Crosta and Packman (2005) investigated the degree of inequality in doctoral student supervision across faculty members within a field of study, across fields of study, and the determinants of differences in doctoral student supervision responsibilities. There was no universal method of matching faculty to graduate student research. Therefore, students could find themselves paired with faculty members who had little or no experience in mentoring graduate student research (Crosta & Packman, 2005). The study also reported that more named chairs were chairing doctoral students' committees than other faculty, especially in the social sciences where being a named chair was associated with 84% more doctoral student committees than those who were not a named chair (Crosta & Packman, 2005).

Graduate student research could be hindered by faculty who were in the position of chairing graduate research but were deficient in knowledge and skills on how to chair a dissertation or thesis. Furthermore, there were other potential consequences due to the lack of formal training of junior faculty on the advisement of graduate student research. The reputation of a program or department could be affected by the quality of dissertations produced by its doctoral graduates (Isaac, Quinlan, & Walker, 1992). Therefore, it is imperative that faculty have the skills and knowledge necessary to effectively supervise graduate student research.

A model supporting dissertation advisement should provide principles of good practice for assisting students, identify potential problems, and outline approaches for addressing the problems associated with supervising graduate student research (Spillett & Moisiewicz, 2004). Without a model, faculty who chair dissertations must rely upon their own experience and finding their way through trial and error (Spillett & Moisiewicz, 2004). There was no literature found which investigated the requirements and policies of departments and the training programs that are provided to junior faculty before they begin mentoring graduate student research.

---

\* Judy Murnan, PhD, MPH, CHES; Assistant Professor; Health Promotion & Education; University of Cincinnati, P. O. Box 210068, Cincinnati, OH 45221-0068; Telephone: 513-556-3855; Fax: 513-556-3898; E-mail: judy.murnan@uc.edu; Chapter: At-Large

Randall Cottrell, DEd, CHES; Professor and Program Coordinator; Health Promotion & Education; University of Cincinnati, Cincinnati, OH 45221-0068; Chapter: At-Large

Liliana Rojas-Guyler, PhD, CHES; Assistant Professor; Health Promotion & Education; University of Cincinnati, Cincinnati, OH 45221-0068; Chapter: At-Large

\* Corresponding Author

## Purpose

The purpose of this study was to assess the current standards utilized by U.S. universities and colleges to supervise theses and dissertations in health education professional preparation programs. Specifically, this study aimed to obtain information on guidelines delineating requirements of theses/dissertation committee composition, faculty characteristics required to serve on committees such as graduate faculty status, faculty rank, years of service, and publication record. Other issues addressed by this study include funding and publication expectations and training guidelines for faculty prior to serving on graduate student research committees in health education and promotion professional preparation programs.

## Significance of the Study

The information gleaned in this study was important because there were no published studies documenting guidelines or current practices of graduate student research supervision by faculty in health promotion and education professional preparation programs. Documenting current standards and guidelines for such supervision would add to the existing body of knowledge and help professional development programs gauge their practices against the practices delineated in this national sample.

## Research Objectives

This study was designed to answer the following research questions: (a) What are the current standards utilized by U.S. universities and colleges to supervise theses and dissertations in health education professional preparation programs? (b) What are the guidelines delineating theses/dissertation committee composition, faculty characteristics required to serve on committees such as graduate faculty status, faculty rank, years of service, and publication record? (c) What funding or publication expectations are there of graduate students who complete thesis or dissertation research? and (d) What training guidelines are there for faculty prior to serving on graduate student research committees in health education and promotion professional preparation programs?

## Methods

The questionnaire was mailed to all graduate level health education programs listed in the American Association for Health Education's 2005 *Directory of Institutions Offering Undergraduate and Graduate Degree Programs in Health Education*. Participants were listed as department heads, directors or program coordinators at a U.S. university or college health education program. The letters were addressed to the designated person at the eligible institution (those offering graduate degrees) listed in the directory. However, the letter included the following statement to ensure that the best possible respondent completed the survey: "As

a department/program head you are probably in the best position to provide this information. If there is someone else in your program who could better respond to these questions, please feel free to pass this questionnaire along." The directory had a total of 255 listings; 137 of them offered graduate programs.

Letters of invitation and a 4-page survey were sent to the participants identified through the directory during the fall of 2006. Two weeks after the first mailing, a reminder letter and a second survey were mailed to promote participation by the institutions which had not yet returned their surveys. This was repeated again three weeks later to those who had not yet responded. Follow-up phone calls were used after the third mailing to further increase the response rate.

Consent to participate in the study was implied by an institution's responding to the survey. The invitation letter included the following statement: "By filling out this survey you give your consent for us to use your responses in our research study." Questionnaires were number-coded only for follow up purposes. All processes were reviewed and approved by the University Institutional Review Board.

## Instrument

A 27-item instrument was developed by the authors and reviewed by a panel of three experts for content validity. Based on feedback from the experts, five items were added to the instrument. Additionally, a small group of selected health education professionals in academia reviewed the instrument for face validity, which served as a pilot-test. The final questionnaire had 32 open- and close-ended items that addressed topics such as: requirements (2 items), rights and privileges (1 item), and any other "special status" tied to the graduate faculty status (1 item); years of service required prior to chairing a thesis/dissertation (3 items); required rank (1 item); required number of publications prior to chairing a thesis/dissertation (2 items); existence of a training program for the faculty (3 items); maximum number of thesis/dissertation faculty members could chair (2 items); committee members selection processes (3 items) and the minimum number of people who could be on their committee (1 item); funding of research projects (1 item); expectations of graduate students publishing their work (1 item); teaching load credit for chairing and serving on thesis/dissertation committees (2 items); satisfaction regarding guidelines for junior faculty supervising graduate student research and how it could be improved (2 items). The questionnaire concluded with a section for background information on the participants' institutions (7 items).

## Results

### Sample

Of the 255 programs listed, 137 were identified as having graduate health education degree offerings. Twenty-seven listings were returned with undeliverable addresses producing

a possible 110 participants. A total of 69 programs returned complete and usable surveys resulting in a final response rate of 62.73%.

### Demographics

The majority of participants 64.7% (n=44) reported offering master level degrees only, while 33.8% (n=23)

offered master and doctorate level graduate degrees and 1.5% (n=1) offered doctorate level degrees only. Most were public institutions 89.6% (n=60), urban 43.9% (n=29) or suburban 34.8% (n=23). The number of full-time faculty ranged from 1 to 34 (M=9.09, SD=5.973). The number of masters students enrolled in the programs ranged from 3 to 222 (M=51.79, SD=38.954) and the number of enrolled doctorate students ranged from 3 to 212 (M=28.98, SD=43.010) (Table 1).

Table 1

#### Sample Demographics

Characteristic	Statistic			
	n	%	M	SD
Public	60	89.6		
Private	7	10.1		
Urban	29	43.9		
Suburban	23	34.8		
Rural	14	21.2		
Level of Degree(s) Offered				
Masters Only	44	64.7		
Masters & Doctorate	23	33.8		
Doctorate Only	1	1.5		
Number of Full-Time Faculty				
1-5	25	39.1		
6-10	16	25.0		
11-15	15	23.5		
16+	8	12.6	9.03	5.973
Number of Students				
Masters				
1-20	12	19.4		
21-40	19	30.6		
41-60	16	25.8		
61+	15	24.2	51.79	38.954
Doctorate				
1-10	4	16.7		
11-20	12	50.1		
21-30	2	8.4		
30+	6	25.6	28.96	43.010
Percent Completion				
Thesis				
0-10%	34	54.8		
11-20%	6	9.6		
21-30%	3	8.1		
>31%	17	27.5		
Dissertation				
0%	2	7.7		
90%	1	3.8		
100%	23	88.5		

Note. Missing data not included



Table 2

*Faculty Eligibility Criteria to Chair Committees*

Eligibility criteria	Master thesis		Doctorate dissertation	
	Yes	No	Yes	No
Require Graduate Faculty Status to Chair	53 80.3%	13 19.7%	28 82.4%	6 17.6%
Require Minimum Number of Years of Service to Chair	8 12.3%	57 87.7%	2 6.9%	27 93.1%
Require Minimum Number of Publications to Chair	13 20.0%	52 80.0%	7 24.1%	22 75.9%

*Note.* Missing data not included

***Faculty Eligibility***

The vast majority of institutions required the faculty to earn/hold graduate faculty status before they could chair a thesis (80.3%, n=53) or a dissertation (82.4%, n=28). Few reported requiring a minimum number of years of service as a faculty member before being permitted to chair either theses (12.3%, n=8) or dissertations (6.9%, n=2). Approximately one out of five institutions required their faculty to have a minimum number of publications prior to chairing a thesis, while 24.1% (n =7) of institutions had that requirement for dissertations (Table 2). Another criterion of eligibility addressed the rank at which a faculty member would be allowed to chair a graduate research committee. The majority reported that a minimum rank of assistant professor was necessary for chairing both master theses (89.2%, n=58) and doctoral dissertations (72.4%, n=21).

***Graduate Faculty Status***

Qualitative analyses revealed that of the majority of programs requiring graduate faculty status for serving on research committees, a variety of requirements were assessed for granting such status. Overall, the most frequently reported requirements to obtain graduate faculty status were having a terminal degree in the field of practice (37.7%), having a minimum number of publications and being a productive scholar (30.3%). Also among the top four most listed requirements reported were: succeeding through the pre-established approval process (15.9%) and having departmental and/or dean support and nomination (14.5%) (Table 3). In regards to the benefits of having graduate faculty status at the participating institutions, respondents to this survey reported several. Most often listed as a benefit were the ability to chair (36.2%) and serve on (29%) theses committees and chairing dissertations (27.5%). Additionally,

participants reported as a benefit the ability to teach graduate courses (27.5%) (Table 4).

***Training***

With regard to training requirements or processes prior to chairing graduate research committees, 15.6% (n=10) of institutions required training prior to chairing a thesis and 25.9% (n=7) required training prior to chairing a doctoral dissertation. Of the participants who reported requiring training, only 12 qualified the type of training required. Four required serving on a graduate research committee prior to chairing a committee, four reported having formal training, and another four reported informal mentoring or instruction from other faculty members as the only form of training.

***Committee Composition***

Respondents reported that the majority of master theses committees were composed of three faculty members (81.7%, n=49). At the doctorate level, there was a range between three faculty (22.6%, n=7) and five faculty members (25.8%, n=8) with the most often reported size being four faculty members (48.4%, n=15). The majority of masters committees members, including the chair, were selected by students (69.8%, n=44). The majority of doctorate dissertation committees, including chairperson, were also selected by the student (57.1%, n=16). The institutions that did not allow students to select their own chair and committees either assigned students a chair and allowed students to select their own committees (for masters thesis 14.3%, n=9; for doctoral dissertation 7.1%, n=2) or the advisor would be the named chair (for masters thesis 11.1%, n=7; for doctoral dissertation 17.9%, n=5). One trend that differed across master and doctorate committees was the requirement of an 'outside' committee member, referring to faculty representation that is external

Table 3

*Requirements to Obtain graduate Faculty Status (n=69)*

Requirement	n (%)
Must have a terminal degree in field	26 (37.7%)
Must have a minimum number of publications or scholarly productivity	21 (30.3%)
Must go through pre-established approval process	11 (15.9%)
Must have Department and/or Dean Nomination	10 (14.5%)
Must be actively conducting research	7 (10.1%)
Must have a satisfactory teaching record	6 (8.7%)
Must demonstrate ability to write grants	4 (5.8%)
Must be at the Associate Professor Level	4 (5.8%)
Must have Masters & PhD committee service	4 (5.8%)
Must be a full time employee	2 (2.9%)
Must be at Assistant Professor level	2 (2.9%)
Must have a minimum of 1 year of employment	2 (2.9%)
Must serve as chair for PhD	1 (1.5%)
GFS is automatic/ All faculty has GFS	1 (1.5%)
Must have a satisfactory service record	1 (1.5%)

*Note.* Total does not equal 100% because many listed multiple benefits.

to the students' immediate department. Specifically, 38.1% (n=24) of institutions reported requiring an external faculty member for masters level committees and 92.9% (n=26) of institutions reported that such a requirement was in place for doctoral dissertation committees (Table 5).

***Faculty Workload Issues***

Questions were asked concerning faculty workload issues such as the maximum number of committees on which one could serve, or reductions in teaching load for service on committees. The majority of institutions (92.4%, n=61) reported that there was no limit or maximum number of committees on which a faculty member could serve.

A majority of institutions also reported that there was no reduction in teaching load for either chairing (68.7%, n=46) or serving (86.4%, n=57) on graduate research committees. It should be noted that some institutions did provide a reduction of teaching loads for chairing 31.3% (n=21) or for serving 13.6% (n=9) on committees.

***Publication and Funding Expectations***

At the masters level, 47.8% (n=33) of institutions reported that there was an expectation for theses to lead to publication but that there was not an established policy in this regard, while 32.3% (n=20) reported having no expectations. At the doctorate level, nearly two thirds (72.4%, n=21) reported having an expectation for publication of the dissertation, but again no established policy for publication existed. Few institutions at both the masters (14.5%, n=9) and doctorate (13.8%, n=4) levels reported having defined procedures or a predetermined amount of time for students to submit research for publication.

Other findings of interest in this study included the level of assistance faculty reported providing students in locating grant funding for theses/dissertations. Specifically, the majority of institutions reported that less than one-quarter of

Table 4

*Benefits of Graduate Faculty Status (n= 69)*

Requirement	n (%)
Can chair thesis	25 (36.2%)
Can serve on thesis	20 (29.0%)
Can chair dissertation	19 (27.5%)
Can teach grad courses	19 (27.5%)
Can serve on dissertation	18 (26.1%)
Membership Grad Faculty/Council and voting	6 (8.7%)
Can serve on university level committees	3 (4.3%)
Receive teaching load reduction	2 (2.9%)
Can help with getting publications, external funding and/or can offer service in public health	2 (2.9%)
Can attend professional meetings	1 (1.4%)
Can write and score comprehensive exams	1 (1.4%)

*Note.* Total does not equal 100% because many listed multiple benefits.

Table 5

*Committee Composition*

Item	Master thesis		Doctoral dissertation	
	n	%	N	%
Minimum Size of Committee				
2 Faculty members	6	8.7	n/a	n/a
3 Faculty members	49	81.7	7	22.6
4 Faculty members	5	8.3	15	48.4
5 Faculty members	n/a	n/a	8	25.8
6 Faculty members	n/a	n/a	1	3.2
Subtotal	60	100.0	31	100.0
Selection of Committee Members				
Student selects own chair and committee	44	69.8	16	57.1
Assigned chair, but student selects committee	9	14.3	2	7.1
Assigned chair and committee	1	1.6	0	0.0
Advisor will be chair	7	11.1	5	17.9
Other	2	3.2	5	17.9
Subtotal	63	100.0	28	100.0
Are students required to have a committee member from outside the department/program?				
Yes	24	38.1	26	92.9
No	39	61.9	2	7.1
Subtotal	63	100.0	28	100.0

both their masters (81.4%, n=48) and doctorate (56.5%, n=13) students receive such assistance. With regards to satisfaction of faculty with the current graduate research supervision guidelines, one-third (32.6%, n=17) of respondents reported being either very dissatisfied or dissatisfied with current guidelines for supervision of theses/dissertations. Another 17.3% (n=9) were somewhat satisfied or partially satisfied. Only half of the faculty (50%, n=26) reported being either satisfied or very satisfied with the current guidelines for faculty supervision of graduate research.

***Inferential Analyses***

Chi-Square analyses were conducted to identify any possible associations between institutions in whether they require graduate faculty status or not and their Research 1 or Research 2 classification. Test results showed that the only variable with a statistically significant value was that between institutions requiring graduate faculty status for doctoral programs and those who were classified as Research 1 institutions ( $\chi^2=15.114$ ,  $df=1$ ,  $p=.001$ ). No other chi square

comparisons resulted in statistically significant differences.

***Limitations of the Study***

Given the nature of self-report data, participants' responses may be subject to error. This potential error could represent a threat to the internal validity of the study. Since the individuals responding to this questionnaire were highly educated and were reporting on their own programs for which they should be very knowledgeable, we assumed that the data were reasonably accurate. Additionally, the final response rate was 62.7% for this study. To the extent that the perceptions of those who responded differ from those who did not respond, this would be a threat to the external validity of the findings. No effort was made to further contact those who did not respond after three mailings and a telephone follow-up.

**Discussion**

The present study found that a majority of health education professional preparation programs required



graduate faculty status to chair theses and dissertations (80% and 82%, respectively). Information was not obtained, however, as to what constitutes graduate faculty status at these institutions. From the experience of the researchers, this varies greatly from institution to institution. At some colleges and universities, graduate faculty status is based on years of service. At other institutions, it can be based on number of publications, number of graduate committees served or some combination of these variables. Still other colleges/universities grant graduate faculty status at the time of initial employment. Further study should be done to better determine what constitutes graduate faculty status and whether graduate faculty status is useful to ensure that junior faculty are competent to direct graduate level theses and dissertations.

Based on this study, few programs required a minimum number of years of service to serve on or chair theses or dissertations (12% and 7%, respectively). Similarly, few programs required a minimum number of publications to chair theses and dissertations (20% and 24%, respectively). Further, it seems most programs had no formal training for faculty prior to supervising theses and dissertations. This may be indicative of a problem in graduate level professional preparation. Do these institutions believe that those who have only written their own thesis and/or dissertation are prepared to guide another through this important process? Does writing one thesis and/or dissertation prepare one for the critical role of mentoring a graduate student? These questions need to be addressed by graduate level professional preparation programs and by future accrediting bodies.

Sixty-eight percent of respondents reported no reduction in teaching load credit for chairing committees, while 86% reported no reduction in teaching load credit for serving on committees. Further, 92.4% reported no limitation in the maximum number of committees on which faculty can serve. Appropriate mentoring of graduate students can take considerable time and effort. Chairing masters and doctoral committees involves numerous planning/progress meetings with students, reading and editing multiple versions of proposals and complete thesis/dissertation documents, formal proposal meetings, formal defense hearings, and the maintenance and submission of required paperwork. Health education programs need to make sure that faculty have time to give due diligence to directing thesis/dissertations, and are given appropriate credit for this work.

Over 1/3 of respondents were either dissatisfied or very dissatisfied with the current standards utilized by their program to supervise theses and dissertations. Another 17.3% were only partially satisfied with the standards currently in place. In all, 50% of respondents were not satisfied with their program's guidelines for supervision of theses and dissertations. These results suggest that room for improvement exists in preparing faculty to direct theses and dissertations. Health education programs might consider establishing a progressive hierarchy for supervision of theses/dissertations whereby junior faculty would first serve on a thesis committee before chairing a thesis committee. They would then serve on

a doctoral committee before chairing a doctoral committee. Another intermediate step might be to require junior faculty to co-chair with a senior faculty member at least one thesis and one dissertation prior to being given the responsibility to chair on their own. Such a system would provide mentoring opportunities for junior faculty to work with senior faculty before chairing committees. Senior faculty would be given the responsibility to walk junior faculty through the entire process of chairing thesis/dissertation committees prior to junior faculty chairing a thesis/dissertation committee of their own. Senior faculty could also help junior faculty to become better readers of theses/dissertations by pointing out common errors and making suggestions on how to help students improve their research and writing skills.

The majority of respondents indicated there was no formal training program at their institution for faculty before chairing a thesis or dissertation (84% and 74%, respectively). A more formal training program could be established whereby junior faculty might read drafts of pre-selected theses and dissertations and provide their comment. These would then be reviewed by senior faculty that had already read and commented on these pre-selected theses. This would allow junior faculty to clearly see what points they had hit and what they had missed. Of course, senior faculty may also find that they missed points that were identified by junior faculty through this process thus improving the reading skills of both groups.

In summary this research clearly indicates that there is a lack of formal policies and procedures for preparing junior faculty to be effective mentors to graduate students. A need exists for health education graduate level professional preparation programs to more systematically prepare junior level faculty for this role and establish stronger guidelines, policies and/or procedures for determining which faculty should be eligible to serve as thesis/dissertation advisors.

## References

- American Association for Health Education. (2005). Directory of institutions offering undergraduate and graduate degree programs in health education. *American Journal of Health Education*, 36, 345-360.
- Aspland, T., Edwards, H., O'Leary, J., & Ryan, Y. (1999). Tracking new directions in the evaluation of postgraduate supervision. *Innovative Higher Education*, 24, 127-147.
- Busch, J. W. (1985). Mentoring in graduate schools of education: mentors' perceptions. *American Educational Research Journal*, 22, 257-265.
- Council of Graduate Schools. (1991). *The role and nature of the doctoral dissertation: A policy statement*. Washington, DC: Council of Graduate Students.
- Crosta, P. M. & Packman, I. G. (2005). Faculty productivity in supervising doctoral students' dissertations at Cornell University. *Economics of Education Review*, 24, 55-65.

- Daloz, L. A. (1999). *Mentor: Guiding the journey of adult learners*. San Francisco: Jossey-Bass.
- Green, S. G. & Bauer, T. N. (1995). Supervisory mentoring by advisors: relationships with doctoral student potential, productivity, and commitment. *Personnel Psychology*, 48, 537-561.
- Isaac, P. D., Quinlan, S. V., & Walker, M. M. (1992). Faculty perceptions of the doctoral dissertation. *Journal of Higher Education*, 63, 241-268.
- Luna, G. & Cullen, D. (1998). Do graduate students need mentoring? *College Student Journal*, 32, 322-330.
- Spillett, M. A. & Moisiwicz, K. A. (2004). Cheerleader, coach, counselor, critic: support and challenge roles of the dissertation advisor. *College Student Journal*, 38, 246-256.

## Guidelines for Manuscript Submission for *The Health Educator*

*The Health Educator* is an official publication of Eta Sigma Gamma, National Health Education Honorary. This peer-reviewed journal is copyrighted by Eta Sigma Gamma and is published twice yearly.

*The Health Educator* invites manuscript submission on a wide variety of topics related to the Honorary's mission of furthering excellence in teaching, research, and service in the health education discipline. Appropriate manuscript topics may include research, literature review, commentary, practical application, and teaching ideas. Articles may be for any setting or age group. With the exception of special solicited manuscripts and articles, the publication requires that at least one author of a manuscript be a current (dues paid) member of an Eta Sigma Gamma chapter or a member at-large.

Generally, manuscripts received by June 1 will be considered for the Fall issue, and manuscripts received by December 1 will be considered for the Spring issue.

### Manuscript Preparation:

#### 1. General manuscript format requirements:

- a. Software program: Microsoft Word
- b. Font: Times New Roman
- c. Font size: 12 point
- d. Orientation: Portrait
- e. Spacing: Double
- f. Maximum manuscript page limit: 15 pages
- g. Maximum abstract length: 200 words
- h. Maximum references: 30
- i. Table/figure orientation: Portrait
- j. Maximum figures/tables: 5

#### 2. Submit two electronic files:

- a. Submit one manuscript that includes the title, abstract, manuscript, references and tables and/or figures (without author information). Tables and/or figures should follow the manuscript body and not be embedded in the manuscript.
- b. Submit a second manuscript identifying all authors' names, degrees, professional titles, addresses, email, FAX numbers, and ESG Chapter membership in addition to the information listed above. Indicate the corresponding author.

#### 3. Teaching ideas and Health Education in Practice topics should be limited to eight pages. Follow the general manuscript format requirements as noted.

#### 4. Follow the Publication Manual of the American Psychological Association (5th edition). If APA format is not followed, the manuscript will be returned.

#### 5. The authors are responsible for accuracy of the manuscript, including references, diagrams, figures, and tables.

#### 6. With each manuscript submission, please include a signed statement attesting that:

- a. This manuscript is not being considered for publication elsewhere at this time and has not been previously accepted or published elsewhere.
- b. The author(s) transfer manuscript copyright ownership to *The Health Educator* upon publication.

Additional publication information may be found at:

[www.etasigmagamma.org](http://www.etasigmagamma.org)

Submit manuscripts to:

Dr. Roberta J. Ogletree, Editor  
bobbie@siu.edu